



TRANSMITTAL FORM

(to be used for all correspondence
after initial filing)

Application Number	10/760,637
Filing Date	January 20, 2004
First Named Inventor	Chantal Auricchio
Art Unit	2818
Examiner Name	
Attorney Docket No.	854063.737

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement; Form PTO-1449 <input checked="" type="checkbox"/> Cited References <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input checked="" type="checkbox"/> Declaration <input type="checkbox"/> Statement under 37 CFR 3.73(b) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund	<input type="checkbox"/> CD(s), Number of CD(s) _____ <input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Additional Enclosure(s) (<i>please identify below</i>): Copy of Notice to File _____ Missing Parts _____ _____ _____
---	---	---

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual Name	David V. Carlson	Customer Number	38106
Signature			
Date	June 28, 2004		

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name		
Signature		Date:

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

493195_1.DOC

EXPRESS MAIL NO. EV336593811US

854063.737
DVC:lcsMail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450SENT: June 28, 2004
DUE: June 29, 2004

Date Stamp



Kindly acknowledge receipt of the below-listed documents by placing your receiving stamp hereon and mailing:

Check; Transmittal Form; Fee Transmittal Form (+copy); Response to Notice to File Missing Parts; Declaration and Power of Attorney; Copy of Notice to File Missing Parts; Certified Priority Document; Information Disclosure Statement; PTO-1449; and 6 Cited References; in re: Chantal Auricchio et al., USAN 10/760,637, filed January 20, 2004, for NONVOLATILE SWITCH, IN PARTICULAR FOR HIGH-DENSITY NONVOLATILE PROGRAMMABLE-

SEED INTELLECTUAL PROPERTY LAW GROUP PLLC

493194_1.DOC

RB/RB



EV 336593811 US



UNITED STATES POSTAL SERVICE®

Customer Copy
Label 11-F June 2002

Post Office To Addressee

ORIGIN (POSTAL USE ONLY)

PO ZIP Code 98104	Day of Delivery <input type="checkbox"/> Next <input checked="" type="checkbox"/> Second <input checked="" type="checkbox"/> Flat Rate Envelope	Flat Rate Envelope	
Date In Mo. 6 Day 28 Year 04	<input type="checkbox"/> 12 Noon <input checked="" type="checkbox"/> 3 PM	Postage \$ 13.65	
Time In <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee	
Weight 1 lbs. 1 ozs.	Int'l Alpha Country Code	COD Fee	Insurance Fee
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials [Signature]	Total Postage & Fees \$ 13.65	

DELIVERY (POSTAL USE ONLY)

Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Date	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Only) Additional merchandise insurance waiver of signature is not required. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article is in location) and I authorize that delivery employee's signature constitutes valid proof of delivery.		
NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		

CUSTOMER USE ONLY

METHOD OF PAYMENT:

Express Mail Corporate Acct. No.

Federal Agency Acct. No. or
Postal Service Acct. No.

FROM: (PLEASE PRINT)

PHONE **206** , **62294900**

DAVID V. CARLSON
SEED INTELLECTUAL PROPERTY
LAW GROUP PLLC
701 5TH AVE STE 6300
SEATTLE WA 98104-7092

DVC:lcs 854063.737 06/28/04

TO: (PLEASE PRINT)

PHONE ()

MAIL STOP MISSING PARTS

COMMISSIONER FOR PATENTS
PO BOX 1450
ALEXANDRIA VA 22313-1450

PRESS HARD.

You are making 3 copies.

FOR PICKUP OR TRACKING CALL 1-800-222-1811 www.usps.com

